

KBN**Nursing** **CONNECTION**

Fall **2008** Edition 17

KENTUCKY BOARD OF NURSING ACCEPTS NCSBN's Regulatory Achievement Award



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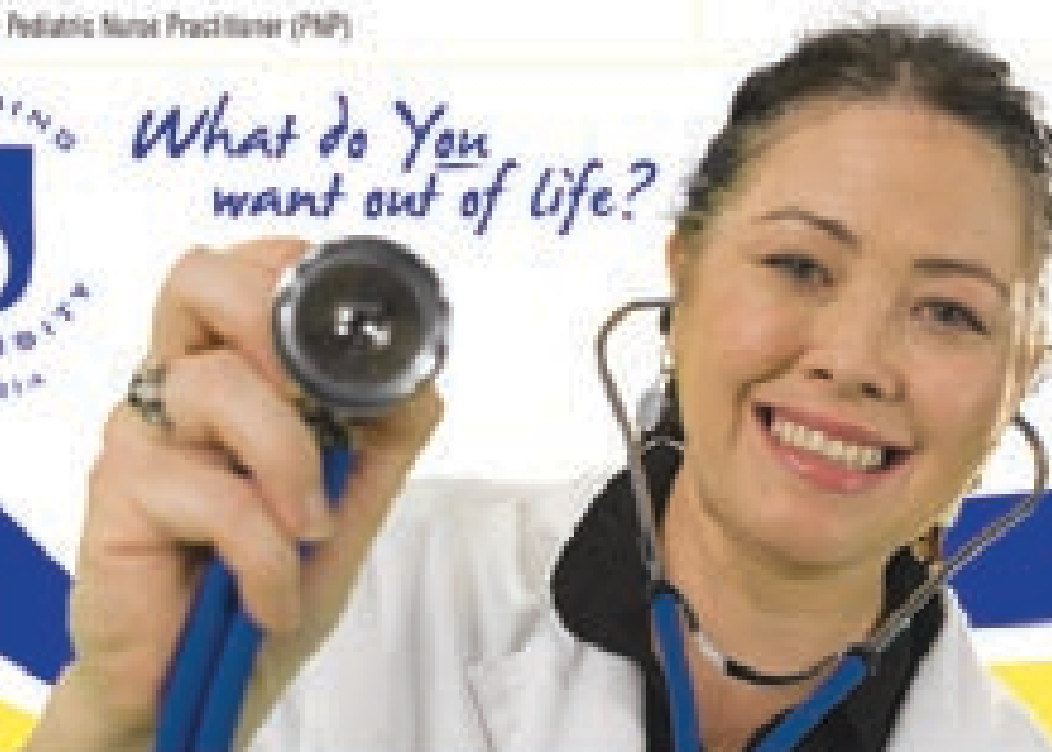
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KBNursing CONNECTION

Fall 2008, Edition 17

Published by the
Kentucky Board of Nursing

312 Whittington Pky Ste 300

Louisville, KY 40222-5172

Phone: 800-305-2042 or 502-429-3300

Fax: 502-429-3311

Web Address: <http://kbn.ky.gov>

KBN MISSION

It is the mission of the Kentucky Board of Nursing (KBN) to protect public health and welfare by development and enforcement of state laws governing the safe practice of nursing.

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CREATED BY: Publishing Concepts, Inc.

Virginia Robertson, Publisher

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www.thinkaboutitnursing.com

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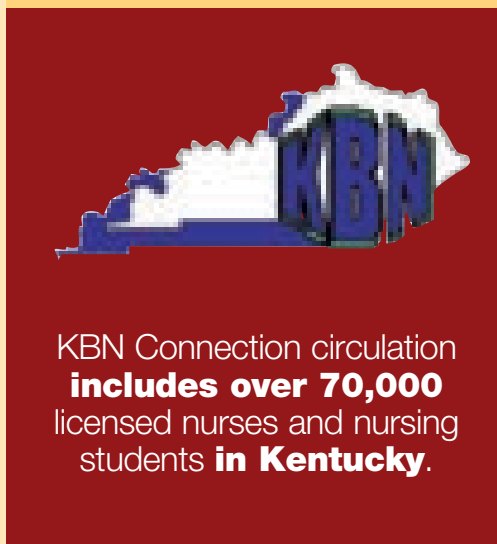
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Statistics Corner

As of September 10, 2008, KBN records show:

| | |
|---|--------|
| RN Active | 53,578 |
| LPN Active | 14,778 |
| RN Retired | 969 |
| LPN Retired | 524 |
| Advanced Registered Nurse Practitioners | 3,517 |
| Sexual Assault Nurse Examiners | 213 |
| Dialysis Technicians Active | 567 |
| Dialysis Technicians Inactive | 372 |

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PRESIDENT'S MESSAGE

I am very proud to announce that the Kentucky Board of Nursing (KBN) was awarded the *Regulatory Achievement Award* at the annual meeting of the National Council of State Boards of Nursing (NCSBN) on August 6.

The Regulatory Achievement Award recognizes the member board that has made an identifiable, significant contribution to the purpose of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare. The following was part of the news release from NCSBN identifying the characteristics of KBN that led to its selection as award recipient.

The Kentucky Board of Nursing's leadership is reflected in its progressive regulatory initiatives:

- *The Kentucky Board was the first in the nation to implement a mandatory Clinical Nurse Internship requirement of 120 hours supervised practice in order to qualify for licensure as a new graduate.*
- *The Board was awarded NCSBN's first contract for its implementation of the Nurse Licensure Compact (NLC) under a grant from HRSA's Office for the Advancement of Telehealth.*
- *The Board successfully implemented many innovative programs such as a sexual assault nurse examiner program and the alternative to discipline for substance abuse program (KARE), which was opened to out-of-state participants upon its entry into the Nurse Licensure Compact.*
- *In 2006, the Board implemented mandatory online license renewal with the impressive result of 99.4 percent of all nurses in the state utilizing the process in the first year.*
- *This Board acted to expand the LPN scope of practice in response to critical patient care needs evidenced across the state. This action was taken in collaboration with both education programs and health care managers.*



In addition, Sharon Weisenbeck Malin, MS, RN, former Executive Director of KBN, received a special 30th anniversary award given to only three (3) individuals honoring those responsible for historic innovation and profound lasting achievements that have significantly contributed to nursing regulation and the NCSBN. Congratulations, Sharon.

As you can see, your Kentucky Board of Nursing continues to lead the nation in fulfilling the mission of public protection through effective regulation. My thanks go to the entire staff and members of KBN for their hard work in achieving this national recognition.

Jimmy T. Isenberg, Ph.D., RN

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EXECUTIVE DIRECTOR'S MESSAGE

When summer gathers up her robes of glory, and, like a dream, glides away.

~ Sarah Helen Whitman

The end of summer seems always to be a time for reflection—more than half of the year is gone; questions such as, “Where did the summer go?” and “What did we accomplish?” are frequently asked. As I reflect on these questions, I’d like to share some of the activities that made for a very busy summer at KBN.

First, congratulations to the Board members, officers and staff whose consistent hard work resulted in KBN receiving the National Council of State Boards of Nursing Regulatory Achievement Award. You can read more about that award in other areas of the *KBN Connection*.

Emerging budget constraints made our ongoing goal of implementing cost-effective, efficient processes even more important. One summer activity that supported this goal was automating the application process for new licensees and those endorsing into the state. Through this interactive process, individuals applying for Kentucky licenses can identify those items still required to support the application, and they can monitor each step of the application process as it proceeds to conclusion. KBN’s migration to a cardless licensure system addressed a major safety concern for consumers, nurses and employers across the country—that of fraudulent licenses. The new permanent card issued to Kentucky nurses instructs employers that current licensure can be validated only on the KBN website.

In June, Governor Steve Beshear made five appointments to KBN. New Board members appointed were: **Sonia Rudolph, MSN, FNP-BC**—assistant professor at Jefferson Community and Technical College, appointed to a four-year term as a practicing nurse; **Susan Mudd, MSN, RN, CNE**—professor at Elizabethtown Community and Technical College, appointed to complete the two years remaining for a vacant educator position; and **Ann Fultz, LPN**—office nurse practicing in Ashland and a former Board member, was appointed to a four-year term. In addition, both **Gail Wise, Ed.D., RN-C** (educator position), and **Patricia Birchfield, DSN, ARNP** (ARNP position), were reappointed to four-year terms. We welcome these new and continuing Board members and look forward to working with them.

In its role of protecting the public, KBN staff collaborates with a number of agencies across the state. One important and ongoing effort is the work with the Kentucky Department of Health. Recent national emergencies emphasize the importance of that collaboration. As the DPH prepared for as many as 2,000-3,000 individuals to be evacuated to Kentucky in anticipation of Hurricane Gustav, KBN and DPH officials worked together to ensure the rapid validation of nurse licenses for the mobilization of volunteers needed to care for evacuees.

The activities noted above are just a few of the many activities undertaken by the Board and KBN staff. As KBN activities continue into the fall, please remember that KBN meetings are open to the public and the schedules for all meetings are posted at www.kbn.ky.gov.

Charlotte F. Beason, Ed.D., RN

NEWS RELEASE

KENTUCKY BOARD OF NURSING RECEIVES NCSBN REGULATORY ACHIEVEMENT AWARD

Chicago – The Kentucky Board of Nursing was recently awarded the Regulatory Achievement Award at the National Council of State Boards of Nursing Inc. (NCSBN®) 2008 Delegate Assembly. The Regulatory Achievement Award recognizes the member board that has made an identifiable, significant contribution to the purpose of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare. The Kentucky Board of Nursing demonstrated participation by board members and staff; effective leadership in development, implementation and maintenance of licensing and regulatory policies; active collaborative relationships between the member board and NCSBN, other boards and the public; and advancement of the NCSBN mission.

NCSBN is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia and four United States territories. The purpose of NCSBN is to provide an organization through which boards of nursing act and counsel together on matters of common interest and

concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.

The Kentucky Board of Nursing's leadership is reflected in its progressive regulatory initiatives:

- The Kentucky Board was the first in the nation to implement a mandatory Clinical Nurse Internship requirement of 120 hours supervised practice in order to qualify for licensure as a new graduate.
- The Board was awarded NCSBN's first contract for its implementation of the Nurse Licensure Compact (NLC) under a grant from HRSA's Office for the Advancement of Telehealth.
- The Board successfully implemented many innovative programs such as a sexual assault nurse examiner program and the alternative to discipline for substance abuse program (KARE), which was opened to out-of-state participants upon its entry into the Nurse Licensure Compact.
- In 2006, the Board implemented mandatory online license renewal with the impressive

result of 99.4 percent of all nurses in the state utilizing the process in the first year.

- This Board acted to expand the LPN scope of practice in response to critical patient care needs evidenced across the state. This action was taken in collaboration with both education programs and health care managers.

Kentucky Board of Nursing members are: Jimmy Isenberg—President, Sally Baxter—Vice President, Carol Komara—Secretary, Anne Veno—Financial Officer, Patricia Birchfield, Christie Coe, Ann Fultz, Jann Gilliam, Cheryl Hickman, Melda Sue Logan, Susan Mudd, Beth Partin, Deborah Phillips, Sonia Rudolph, and Gail Wise. The Executive Director of KBN is Charlotte Beason.

The National Council of State Boards of Nursing Inc. (NCSBN) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia and four U.S. territories.

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CONSUMER PROTECTION CORNER

Disciplinary Case Review by Ann Tino, RN, BSN, Certified Nurse Investigator

Disclaimer: Although disciplinary action taken by KBN is a matter of public record, the identity of any nurse referenced in this article will not be revealed.

I am sure that part of my nursing education introduced me to the Board and its functions. I am sure that many years ago when I began my career with high hopes of making a difference in the lives of my patients, I was well aware of my scope of practice, the laws that governed my practice, and my professional responsibility as a registered nurse.

That being said, like so many other facets of our busy lives, we might not reconnect with those truths until we are placed in a situation that involves a question of our practice, poor patient outcome or being reported to the Board of Nursing. This article is written as a friendly reminder about the *Kentucky Nursing Laws*.

DID YOU KNOW?

- Anytime you change your mailing address, you are required by law to notify KBN. Some nurses have been under investigation for minor violations and end up losing their nursing license because they have moved and never received the mail from KBN. I know that is hard to believe but very true. KRS 314.107 reads "any person licensed by the board shall maintain a current mailing address ... and immediately notify the Board in writing of a change of mailing address. A licensee is deemed to have consented to service of notices or orders of the Board at the mailing address on file with the Board ... and constitute valid service of the notice or order."
- If you hold another professional license that is suspended or ter-

minated, you are required by law to notify KBN within 30 days of the entry of the final order. A copy of the final order and a letter of explanation need to be submitted according to KRS 314.108.

- Any misdemeanor or felony conviction, except traffic related misdemeanors other than operating a motor vehicle under the influence of drugs or alcohol, in this or any other jurisdiction need to be reported to KBN. A copy of the certified court records and a letter of explanation are required according to KRS 314.109.
- When applying for initial licensure, the applicant attests that he/she will have the required two HIV/AIDS continuing education hours within six months of signing the application. This is called an affidavit of reasonable cause. Even if you never work in Kentucky or let your license lapse after initial licensure, on the date you signed the application, you said you would obtain the hours. I can assure you that after the six months is up, you will be asked to submit proof of earning those hours. Failing to show the proof results in a referral to the KBN Consumer Protection Branch. Licensees at that point have to earn the hours, submit verification with a letter of explanation related to their delay and then enter into a consent decree with KBN. This is considered a non-willful violation and is not reportable in our newsletter or to the National Council for State Boards of Nursing. Specifically, this consent decree requires a civil penalty payment of \$100.
- It is unlawful to call or hold yourself out as, or use the title of nurse to practice, or offer to practice as a nurse unless you are licensed or privileged under the provisions of KRS 314.

continued on page 12

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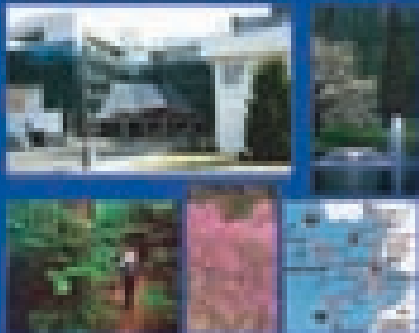
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CONSUMER PROTECTION CORNER continued

- KBN can immediately temporarily suspend a nurse's license against which disciplinary action or an investigation is pending in order to protect the public. KRS 314.089 indicates the procedure in these types of cases.
- KBN can also issue an immediate temporary suspension of a license if the licensee has been ordered to have a chemical dependency, mental health, physical health and/or neuro-psychological evaluation and fails to do so within the specifics of the order. KRS 314.085 defines the parameters of this law.
- If a licensee issues payment for a license to KBN by a check, draft, order, or electronic funds transfer that is dishonored by the bank or financial institution upon which it is drawn, and the licensee fails to reimburse KBN for the amount of the check, draft, order, or electronic funds transfer and any applicable fees within 30 days of written notice by KBN, the Board can issue an immediate temporary suspension of the license until the licensee pays all required fees and meets the requirements for reinstatement of the license.
- Other provisions of the Kentucky Revised

Statutes allow KBN to issue an immediate temporary suspension of a license if the licensee fails to meet his/her repayment obligation under any financial assistance program administered by the Kentucky Higher Education Assistance Authority (KRS 164.772) or fails to pay child support as ordered by the Kentucky Cabinet for Families and Children, Division of Child Support (KRS 205.712).

Failure to be aware of the mentioned items and comply with the *Kentucky Nursing Laws* could result in your file being forwarded to the KBN Consumer Protection Branch. I strongly encourage you to read your newsletters, refer to the website, and call us for any questions or concerns related to your nursing practice. Your nursing license is a privilege and should be treated as such.

For practice-related issues, contact Sharon Mercer, Nursing Practice Consultant, at 502-429-3307 or toll-free at 1-800-305-2042, ext 231. For questions about the KARE for Nurses Program, contact Paula Schenk, Program Director, 502 429-3300, ext 236, or toll-free at 1-800-305-2042, ext 236. For a copy of the *Kentucky Nursing Laws*, you can go online to <http://kbn.ky.gov>, or stop by the KBN office and purchase a hard copy for \$2.

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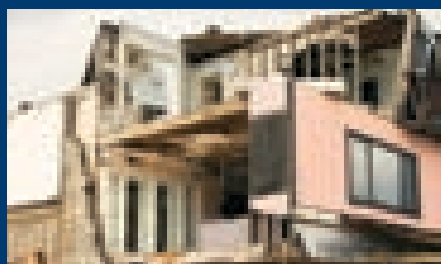
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E-LEARNING FOR THE NURSING COMMUNITY

KENTUCKY DEPARTMENT OF PUBLIC HEALTH CREATES K HELPS SYSTEM

After the devastation of Hurricane Katrina, public officials have been working to make preparations in the event of a large-scale public health emergency or natural disaster oc-



curing in Kentucky and surrounding states. History has shown that such events could cause health and medical systems to become overwhelmed with individuals seeking treatment. In response to this call, the Kentucky Department of Public Health has created K HELPS, the Kentucky Health Emergency Listing of Professionals for Surge Program. K HELPS is a state-based system to register medical professionals interested in volunteering to offer assistance during public health emergencies or disasters. Under this new system, K HELPS is currently placing emphasis on recruiting nurses to volunteer their services. For nurses wanting to be proactive in the event of an emergency or natural disaster, registration is quite easy; any nurses interested in volunteering can register with K HELPS online at <https://khelphs.chfs.ky.gov>. You may also visit your local health department to fill out a hard copy application.

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“NURSING....YESTERDAY....TODAY....and TOMORROW....”

By: Melda Sue Logan, MSN—Retired; Cheryl Hickman, RN, BSN, MS; *KBN Board Members*

Nursing has been, and continues to be, a wonderful career. Unlike 30 and 50 years ago, today many diverse opportunities exist in the profession of nursing. Over the years, nursing education transitioned from the traditional hospital diploma program to programs in universities and colleges. While the art of nursing is still being taught, today's fast-paced health care system has changed the culture of nursing. In the past, patients stayed for many days in the hospital and nurses got to know “their patients.” Today, the length of time a patient stays in the hospital has been greatly reduced. Surgical procedures are being done on an outpatient basis today that only a few years ago entailed a substantial hospital stay. Historically, nurses focused on many comfort measures such as preparing the patients for meals, morning and bedtime care that included bathing and other daily living activities, talking and listening to patients, and preventing skin breakdown, to name a few. In years past, staffing was consistent on hospital units and did not fluctuate with patient census. Patients were not as sick, Intensive Care Units (ICU) were emerging, and technology was not as advanced.

Today, nurses have more ‘bells and whistles’ than ever before in the history of the profession. Until the late 70s, and on into the 80s, nurses had to rely mainly on their assessment skills to provide safe, competent patient care. In today's world of advanced technology, an array of medical equipment and medical avenues are available to assist nurses with their nursing care. Increased technology, shorter length of stay for patients, sicker patients, and an aging workforce now contribute to the significant change in the work environment and the nursing culture. A few years ago, nurses wrote pages of nursing notes; today, nurses can point and click to make entries on an electronic

medical record. The electronic medical record now includes documentation that is necessary to meet Joint Commission requirements, CMS requirements, and necessary documentation to support the nursing care given in the event it should be questioned as to whether standards of care were met.

Strong assessment skills, and being an attentive listener to patient symptoms, continue to be attributes of a good nurse. While, in today's health care system, nurses have access to more diagnostic and patient care equipment, there is no substitute for strong assessment and communication skills. Machines cannot tell a nurse everything, and machines can fail. Good communication and assessment skills, compassion, providing comfort measures, and being a patient advocate coupled with being a safe and competent practitioner are hallmark qualities in the art of nursing.

Today's technological advances have helped the health care professions greatly. An excellent example is the medication administration process using a machine (pyxis) and bar coding technology. In years past, nurses had to handwrite every medicine card for each patient and use trays for “passing” the medication—medicines were “poured” from a stock cabinet. This process left the door open for increased errors. Today, every medication is bar coded before being administered to a patient. The pyxis machines have all patient information downloaded, and there are red flags that alert nurses to potential errors such as the wrong patient, wrong time, wrong pill, etc. This medication administration process assists the nurse and protects the patient. Bar coding helps to ensure that the right medicine is given to the right patient.


Infection Control (IC) Departments did not exist in the 70s. IC departments began to increase in the 80s and are mandatory today. Pre-1980, Methicillin



Resistant Staph Aureus (MRSA) was rare and hand washing was usually done only after dressing changes or cleaning patients. Today, MRSA is no longer rare, and strict Body Substance Precautions, an increase in the use of gloves and hand washing guidelines must be followed with all patients.

In the early years of nursing, physicians, nurses and other health care providers had time to conduct round table discussions on the job which were teaching and learning opportunities. Today, the fast pace and complex health care arena requires a more formal educational and competency-based teaching model. Much has changed in the profession of nursing through the years, and change will continue; what cannot change is the nurse's commitment to be a patient advocate. Throughout the years, nursing has been, and hopefully will always be, the glue that holds the health care team together. Nurses must never let the glue that binds good nursing practice and patient care lose its cohesive properties. Patients – then, now, and in the future – will always look to the nurse to aid them in becoming well again. Nurses continue to use their competent practice to facilitate healing. It is both the art and the science of nursing that we as professionals must cherish and employ in our practice today, tomorrow, and always.

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HIGHLIGHTS OF BOARD ACTIONS

Education Committee

Ashland Community and Technical College, Ashland — Practical Nursing Program:

- Accepted the initial response from the program and directed that the final report providing evidence of the resolution of each recommendation be submitted by September 1, 2008.

Beckfield College, Florence — Associate Degree Nursing Program:

- Accepted that the May 2008 report submitted from the program provides evidence of the satisfactory completion of all requirements as noted in the site visit report of March 5-6, 2007.
- Agreed that as the program has supplied requested materials and there is evidence to indicate that all requirements have been met, no additional reporting is required.
- Accepted that the approval status of the program remain Conditional pending the 2008 NCLEX results.

Beckfield College, Florence — Practical Nursing Program:

- Approved that the proposed program be granted Developmental approval status, with admission of a first class no earlier than January 2009.
- Directed that the program develop a method to ensure the separation of the RN and the PN programs as to not apply undue strain on the outcomes of either program.
- Directed that the program notify the Board at the time that the first class is accepted for admission.
- Directed that the program administrator arrange with the education consultant for a site visit at least one month prior to the admission of the first class.
- Directed that at the time of the pre-admission site visit, the program shall have available for the consultant the following: documentation of the implementation of the program as compared to the approved proposal; list of students admitted to the first class and their adherence to admission criteria; a copy of the nursing and campus student handbooks; copies of each syllabus for the first semester/quarter; list of faculty and clinical instructors for the first academic year as assigned by course; summary of clinical agencies utilized for the first academic year by course; copies of signed clinical agreements; policy manual for the nursing program; complete evaluation plan for the program.
- Directed that the program submit a progress report at the conclusion of the first semester/term documenting the implementation of the program as compared to the proposal and any revisions.

Brown Mackie College – Northern Kentucky, Ft. Mitchell — Practical Nursing Program:

- Accepted the follow-up response from the program to the Site Visit Report of July 2007.
- Approved that due to the resignation of the program administrator, a progress report detailing process of requirements be submitted by October 1, 2008.
- Directed that the program confer with the education consultant to establish a follow-up meeting to review requirements.

Brown Mackie College, Louisville — Practical Nursing Program:

- Approved that the proposed program be granted Developmental approval status for an admission class no earlier than January 2009.
- Agreed that the location for the proposed program presently does not meet all requirements set forth in 201 KAR 20:350, *Educational Facilities and Resources for Prelicensure RN and PN Programs*.
- Directed that the program may begin construction on the facility but may not start classes until the Education Consultant has returned for a site visit to ensure that all requirements have been met.
- Directed that the program shall notify KBN at the time that the first

class is accepted for admission to arrange a site visit by the education consultant no later than one month prior to students beginning classes.

- Approved that at the time of the site visit, the following shall be available for review by the consultant: physical plant to include computer lab area, clinical lab, classroom, and print resources; nursing references for the students that will be available on site (the references shall be present at the time of the site visit along with a policy for how the program plans to maintain the currency of the resources); a plan to ensure that the students are oriented to the online library resources available to them.
- Approved that at the time of the pre-admission site visit, the program shall have available for the Consultant the following: documentation of the implementation of the program as compared to the approved program: list of students admitted to the first class and their adherence to admission criteria; copies of the nursing and campus student handbooks; copies of each syllabus for the first semester/quarter; list of faculty and clinical instructors for the first academic year as assigned by course; summary of clinical agencies to be utilized for the first academic year by course; copies of signed clinical agreements; policy manual for the nursing program; complete evaluation plan for the program.
- Directed that the program submit a progress report at the conclusion of the first semester/term documenting the implementation of the program as compared to the proposal and any revisions.

Elizabethtown Community and Technical College, Elizabethtown — Practical Nursing Program:

- Accepted the initial response from the program to the Site Visit Report of October 11, 2007.
- Approved that the final report providing evidence of the resolution of each recommendation be extended to September 1, 2008, due to extenuating circumstances.

Gateway Community and Technical College, Edgewood — Associate Degree Nursing Program:

- Agreed that the location for the programs meets all requirements set forth in 201 KAR 20:350, *Educational Facilities and Resources for Prelicensure RN and PN Programs*.

Jefferson Community and Technical College, Louisville — Associate Degree Program:

- Accepted the March 25-27, 2008, Survey Visit Report, and approved the "requirements to be met" as stated in the report.
- Directed that the program submit a response by July 15, 2008, to include a timeline for the correction of each "requirement to be met" identified in the report.
- Directed that the program submit evidence that all requirements are met within six months with a final report as to the final resolution of each identified requirement submitted no later than January 13, 2009.
- Directed that should the program's January 13, 2009, response to this site visit not provide satisfactory response to all requirements, the program administrator and the college president shall appear before the Board to provide justification as to non-adherence to requirements.
- Accepted that the approval status remain Full pending receipt of reports and the 2008 NCLEX pass rate.

Maysville Community and Technical College – Licking Valley, Cynthiana — Practical Nursing Program:

- Accepted the April 10, 2008, Survey Visit Report for adherence to regulations pursuant to the first graduating class of the program and approved the "requirements to be met" as stated in the report.
- Directed that the program submit a response by July 14, 2008, to include a timeline for the correction of each "requirement to be met" identified in the report.
- Directed that the program submit evidence that all requirements are

met within six months, with a final report as to the final resolution of each identified requirement submitted no later than December 15, 2008.

- Directed that should the program's response to this site visit not provide satisfactory response to all requirements, the program administrator and the college president shall appear before the board to provide justification as to non-adherence to requirements.
- Approved that the program be changed from Initial to Conditional approval status until the satisfactory receipt of the required timeline for the correction of requirements to the satisfaction of the Board.

Somerset Community College – Clinton Center, Albany — Practical Nursing Program:

- Accepted the April 8, 2008, Survey Visit Report for adherence to regulations pursuant to the first graduating class of the program and approved the "requirements to be met" as stated in the report.
- Directed that the program submit a response by July 14, 2008, to include a timeline for the correction of each "requirement to be met" identified in the report.
- Directed that the program submit evidence that all requirements are met within six months, with a final report as to the final resolution of each identified requirement submitted no later than December 15, 2008.
- Directed that should the program's response to this site visit not provide satisfactory response to all requirements, the program administrator and the college president shall appear before the board to provide justification as to non-adherence to requirements.
- Approved that the program be changed from Initial to Conditional approval status until the satisfactory receipt of the required timeline for the correction of requirements to the satisfaction of the Board.

Spencerian College, Louisville — Associate Degree Program:

- Accepted the follow-up report from the program.
- Directed that the program continue to be monitored with respect to areas noted in the May 2008 analysis and that the program develop and implement assessment practices that monitor the ongoing progress of students and submit these assessment practices to the Board no later than October 1, 2008.
- Approved that the program remain Conditional approval status pending the 2008 NCLEX results.

OTHER PROGRAM BUSINESS:

Kentucky State University, Frankfort — Associate Degree Program:

- Accepted that the April 15, 2008, report submitted by the program is evidence of the satisfactory completion of all requirements as requested by the Board correspondence dated February 15, 2008.

Maysville Community and Technical College – Licking Valley, Cynthiana — Associate Degree Program:

- Directed that the waiver petition for Ellie Pribble, RN, to assume a didactic faculty position with the new program be denied.

Somerset Community College, Somerset —

Practical Nursing Program:

- Approved the addition of a weekend/evening track to the program.
- Accepted that the program administrator arrange with the education consultant for a site visit at least one month prior to the admission of the first class.
- Accepted that at the time of the pre-admission site visit, the program shall have available for the consultant the following: documentation of the implementation of the program; list of students admitted to the first class and their adherence to admission criteria; a copy of the nursing and campus student handbooks; list of faculty and clinical instructors for the first academic year as assigned by course; summary of clinical agencies to be utilized for the first academic year by course; copies of signed clinical agreements; complete evaluation plan for the program; updated copy of that portion of the respective program's systematic evaluation plan to include how the curriculum change will be evaluated with respect to student achievement of program outcomes.
- Directed that the program submit a progress report at the conclusion

of the first semester/term documenting the implementation of the program as compared to the proposal and any revisions.

Brown Mackie College – Northern Kentucky, Ft. Mitchell —

Practical Nursing Program:

- Approved the waiver petition for Nancy Hudson, RN, Interim Program Administrator, to serve as the permanent program administrator, although she does not have the requisite two years experience in nursing education.

CONTINUING COMPETENCY:

Accepted the following reports as submitted: Initial CE Provider Approval, Individual Review of CE Offerings, CE Audit (RN/LPN), and CE Audit (ARNP).

KCTCS CURRICULUM CHANGE REQUESTS:

- Approved the curriculum changes proposed by KCTCS to the RN and PN programs.
- Directed that each program adopting the modular curriculum provide to the Board by November 1, 2008, an updated copy of that portion of the respective program's systematic evaluation plan to include how the curriculum change will be evaluated with respect to student achievement of program outcomes.
- Accepted that should a program elect not to adopt the revised curriculum at this time, the program would be required to submit a request for a curriculum change to the Board as outlined in regulation.

Practice Committee

Approved the letters of response to the opinion requests on the scope of licensed practical nursing practice to perform Urgent PC Neuromodulation; scope of RN practice to perform and collect endocervical swab specimens for the assessment of sexually transmitted diseases; scope of RN practice for a RN to perform ear stapling for the treatment of obesity; and scope of RN practice for a RN to perform the Department of Transportation (DOT) commercial motor vehicle driver physical examination and completion of the medical examiner's certificate.

Advanced Registered Nurse Practice Council

Appointed Marilyn Osborne to the Advanced Registered Nurse Practice Council.

Dialysis Technician Advisory Council

Appointed Ann Boone Rich and Mellisa McCloud to the Dialysis Technician Advisory Council.

Consumer Protection Committee

- Approved the proposed revisions to 201 KAR 20:410, the *Expungement of Records*.
- Approved the proposed revisions to the guidelines for evaluation of a minor incident.

Unlicensed Assisted Personnel Task Force Committee

- Motion was made and seconded to continue the pilot program of the residential psychiatric treatment centers until the UAP Task Force returns to the Board with their recommendations as a whole.
- Children's Alliance representatives were not in attendance. They will be asked to stop their training until the Board has had a chance to hear their report and KBN makes a recommendation on their pilot program.

Nursing Incentive Scholarship Awards

Directed the funding of six continuation applicants (\$16,500) and 87 new applicants (\$250,500). All applicants through 80-point range and selected cohort of applicants (expected graduation by May 2011) in the 75-point range that include: 48 RN to GRD; 20 RN to BSN; 16 LPN to RN; three students not currently nurses (two in AD programs, one in LPN program, all have financial need). Total funding for scholarships in 2008-2009 will be \$267,000.

Disciplinary Actions

Approved eight Proposed Decisions as written and received reports on the approval of seven Agreed Orders, 14 Consent Decrees, and two Removal of Licenses from Probation.

Role of the LPN in Blood Administration

The Kentucky Board of Nursing (KBN) has received multiple inquiries regarding the role of the LPN in blood administration. Kentucky Administrative Regulation 201 KAR 20:490, *Licensed practical nurse intravenous therapy scope of practice*, under Section 5(5), Functions That May Be Performed, states: "Administration, monitoring, and discontinuance of blood, blood components and plasma volume expanders" is within the scope of LPN practice. This administrative regulation also defines "administration" as "to initiate and infuse intravenous therapy."

An administrative regulation has the force and effect of law. There has been no change in this administrative regulation. The LPN can still administer those items listed in Section 5(5) of 201 KAR 20:490. To access KBN regulations via the KBN website, go to <http://kbn.ky.gov/laws>, click on Kentucky Administrative Regulations, and go to Chapter 20.

Kentucky Nursing Laws, KRS 314.011(10)(c) requires that licensed practical nurses (LPN) practice under the supervision and direction of the registered nurse, advanced registered nurse practitioner, physician or dentist. Supervision requirements of the LPN performing IV therapy is addressed in 201 KAR 20:490, Section 3.

Section 3(1) "an LPN performing IV Therapy procedures shall be under the direction and supervision of a registered nurse (RN), advanced registered nurse practitioner (ARNP), physician, or dentist."

Section 3(3) lists the cases where the LPN's supervisor must be physically present in the immediate vicinity of the LPN and immediately available to intervene in the care of the patient. One such case is if the patient is receiving blood, blood components, or plasma volume expanders.

Advisory Opinion Statement (AOS) #3, *Role of Nurses in Intravenous Therapy Practice*, has been revised to conform to the regulation. The Practice Committee will be reviewing the AOS at its November meeting.

Kentucky Nursing Laws hold all nurses individually accountable and responsible for their nursing decisions. The LPN accepting the assignment and the supervisor delegating the task must know if the LPN is educationally prepared and clinically competent to perform the assigned task. Contact Sharon Mercer, KBN Practice Consultant, at SharonE.Mercer@ky.gov if you have questions regarding LPN scope of practice.

Frequently Asked Questions from School Nurses

With the start of the new school year, KBN has received many inquiries related to scope of practice of the nurse in the school setting. Below are some of the most often asked questions:

Q. Where can I find nursing regulations, laws, and opinion statements related to nursing practice in the schools?

A. All of these can be found on the KBN website. Go to <http://kbn.ky.gov/laws/> for the laws and regulations; and go to <http://kbn.ky.gov/practice/aosindex.htm> for the advisory opinion statements. Please note that you need to scroll down to Chapter 20 when you access the administrative regulations. The advisory opinion statements that are of particular interest to school nurses are AOS #15, *Roles of Nurses in the Supervision and Delegation of Nursing Acts to Unlicensed Personnel*, and AOS #30, *School Nursing Practice*.

Q. Can a nurse delegate the injection of insulin to an unlicensed person?

A. This is addressed in Advisory Opinion Statement #15, which states in part: As stated in KRS 314.011(6)(c) and (10)(c), the administration of medication is within the

practice of nursing. The administration of medication to patients in health care facilities is both the responsibility of nurses and an integral part of the nursing care rendered to patients. Medication may also be administered to patients in health care facilities by physicians or other health care professionals who have statutory authority to administer medications. In Kentucky, personnel known as medication aides or similar titles may function by administering oral and topical medication in long-term care facilities only through delegation by and under the supervision of a registered nurse or licensed practical nurse. Unlicensed personnel who function as medication aides must have successfully completed the state approved course for administration of medication as defined in the administrative regulations issued by the Cabinet for Health and Family Services, Office of the Inspector General.

The following acts related to the administration of medications should not be delegated to unlicensed personnel: a) Conversion or calculation of drug dosage; b) administration of medications via any injectable route.²

² For intervention in a life-threatening situation, a registered nurse may teach and delegate to non-nurse school employees the preparation and administration of injectable

glucagons, epinephrine hydrochloride (using an administration system such as “EpiPen”) and diazepam suppository. The medications would be given according to written established policies and procedures of the school system.

Q. Can a nurse adjust the insulin dose based on an order from the parent?

A. *Kentucky Nursing Laws, KRS 314.011(6)(c)* states in part: (6) “Registered nursing practice” means the performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in: (c) The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced registered nurse practitioner.

In February 2008, the Kentucky Board of Nursing issued an advisory opinion on this subject. Based upon KRS 314.011(6)(c), the nurse must administer a medication as prescribed by a physician, physician assistant, dentist or advanced registered nurse practitioner. Medication dosages or changes in dosages written by the parent and presented to the school nurse for medication administration by the nurse must be verified by the prescribing practitioner.

Q. Can a nurse delegate carbohydrate counting to an unlicensed person?

A. Unlicensed personnel may report the amount of the food eaten to the nurse. The nurse would calculate the carbs and insulin dose. AOS #15 states in part: The following acts related to the administration of medications should not be delegated to unlicensed personnel: a) Conversion or calculation of drug dosage; b) Administration of medications via any injectable route.

Q. Can a nurse accept a DNR (Do Not Resuscitate) order from a parent?

A. The nurse must know the school policy related to this. If the school does accept these orders, then the nurse must have a written order from the student’s physician.



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Renewal Statistics

Total renewed from July 1 until August 30, 2008:

| | |
|------|--------|
| RN | 13,233 |
| LPN | 2,159 |
| ARNP | 1,303 |
| SANE | 48 |

Failure to Renew

If you failed to renew by midnight, October 31, or you failed to submit all requirements for renewal, you will be required to apply for reinstatement of your license by submitting the Universal Application for Licensure, the reinstatement fee, and copies of your continued competence. Remember, you cannot practice as an RN, LPN, ARNP, or SANE in Kentucky if your license has lapsed.

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ARNP applicants should not use the RN online application but should apply using the paper RN-ARNP application. Soon to come will be an online application for the Kentucky RN or other compact RN licensee who is applying for initial Kentucky ARNP registration or for the reinstatement of the ARNP registration. Development for additional online applications is ongoing.



Applicants for initial ARNP registration or reinstatement of a previous ARNP registration should not use the RN online application but should apply using the paper RN-ARNP application.

ARNP National Certification

In accordance with the *Kentucky Nursing Laws*, KRS314.042 (4), an advanced registered nurse practitioner must maintain current national certification in addition to current ARNP registration with KBN. If the



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national certification lapses for any period of time, an ARNP cannot practice in the advanced practice role, even though the ARNP registration is current.

It is the responsibility of each ARNP to send evidence of current national certification/recertification to KBN before the national certification expires. Proof of certification must include the organization name, the ARNP's name, the certification number, and the certification expiration date.

It is suggested that ARNPs apply promptly for recertification with the national certification organization. Even though a certification organization may have an extension period for late applications, KBN does not. Practicing as an ARNP beyond the expiration date of national certification may be cause for disciplinary action.

Protection of Nursing Licenses

Did you know that the license number you are assigned upon initial licensure by KBN is the license number you will always have? Even if you let your license lapse and reinstate many years later, you will have the same license number.

In an effort to protect its licensees, KBN has moved to a "cardless" renewal system. The move to a "cardless" system of licensure is further commitment to the Board's mission of public protection. With increased reports of lost or stolen license cards and cards never received in the mail, the Board wanted to reduce the risk that those cards could be used to impersonate Kentucky's licensed nursing professionals.

The new license card displays the nurse's name, license number, licensure type (RN, LPN, ARNP, SANE), and original date of Kentucky licensure. The license expiration date is NOT displayed.

This new system encourages employers to use the KBN website to validate that a license is current, valid, and clear of disciplinary action. The KBN website validation is considered primary source validation.

Another mechanism in protecting license numbers and reducing the risk of someone impersonating a nurse is to have KBN records reflect that a nurse is deceased. When this is done, the validation of a license notes that KBN records reflect the individual who holds that unique license number is deceased.

Any licensee, employer, or family member can submit information to KBN that a nurse has expired. A copy of a death certificate is preferred, but many individuals send newspaper clippings or letters with the nurse's name and date of death. KBN staff validates each notification received with the Cabinet for Health Services, vital records division.

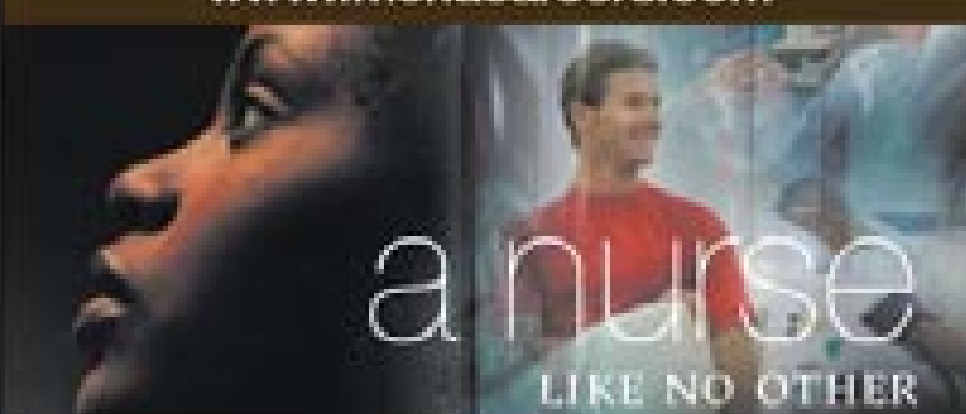
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CONTINUING COMPETENCY REQUIREMENTS

by **Mary Stewart**, Continuing Competency Program Coordinator

Earning Periods for All Nurses

Nurses are required to renew their license on a yearly basis. The CE/competency earning period is the same as the licensure period, i.e., November 1 through October 31.

KBN audits a randomly selected pool of nurses each year. If audited, failure to provide documentation of having earned the required CE/competency will subject the licensee to disciplinary action in accordance with the *Kentucky Nursing Laws*.

CE Information Concerning Annual Renewal

According to KBN Administrative Regulation 201 KAR 20:215, validation of CE/competency must include one of the following:

1. Proof of earning 14 approved contact hours; OR
2. A national certification or recertification related to the nurse's practice role (in effect during the whole period or initially earned during the period); OR
3. Completion of a nursing research project as principal investigator, coinvestigator, or project director. Must be qualitative or quantitative in nature, utilize research methodology, and include a summary of the findings; OR
4. Publication of a nursing related article; OR
5. A professional nursing education presentation that is developed by the presenter, presented to nurses or other health professionals, and evidenced by a program brochure, course syllabi, or a letter from the offering provider identifying the licensee's participation as the presenter of the offering; OR
6. Participation as a preceptor for at least one nursing student or new employee undergoing orientation (must be for at least 120 hours, have a one-to-one relationship with student or employee, may precept more than one student during

the 120 hours, and preceptorship shall be evidenced by written documentation from the educational institution or preceptor's supervisor); OR

7. Proof of earning seven approved contact hours, PLUS a nursing employment evaluation that is satisfactory for continued employment (must be signed by supervisor with the name, address, and phone number of the employer included), and cover at least six months of the earning period.

8. Certain college credit courses may be used to meet CE requirements. Nursing courses, designated by a nursing course number, and courses in physical and social sciences, such as Psychology, Biology, and Sociology, will count toward CE hours. One semester credit hour equals 15 contact hours; one quarter credit hour equals 12 contact hours. If a course does not meet this criterion, refer to the Individual Review of CE Offerings section.

Note: Prelicensure general education courses, either electives or designated to meet degree requirements, are NOT acceptable, nor are CPR/BLS, in-service education, nor nurse aide training. ACLS or PALS courses ARE acceptable for CE hours if given by an approved provider (see Table 1).

Individual Review of CE Offerings Presented by Organizations NOT Recognized by KBN:

Contact the KBN office or go to the KBN website to obtain an *Individual Review Application* form. After completing the form, return it to the KBN office with requested materials and the \$10 application fee. **Individual Review Applications must be submitted by November 30 of the licensure year.** KBN will notify the individual of the review outcome (i.e., approval or rejection) within about six weeks of receipt of the submitted materials. A notification of CE/competency approval should be retained for a minimum of five years. Individual review is not required if an offering is approved for CE by an organization recognized by KBN (see Table 1 for a list of these organizations).

continued on page 27

ATTENTION ARNPS! Update in Approved CE Providers:

Effective March 14, 2008, 201 KAR 20:220 was amended to reflect that pharmacology CE hours earned from a provider that is recognized by an organization from the list in Table 1 will be acceptable to meet the ARNP pharmacology requirement of 201 KAR 20:215. (ARNPs are required to earn five contact hours of approved CE in pharmacology each licensure period).

Simply put, if the CE is accepted by your certifying body (see Table 1) for purposes of recertification, then it will be acceptable to KBN. It is the responsibility of the ARNP to contact the individual certifying body for a complete and up-to-date list of recognized providers for their organization. For questions, contact KBN at 502-429-3300, ext. 237.

Table 1

National Nursing Organizations Recognized by KBN for Continuing Education

- American Academy of Nurse Practitioners (AANP)
- American Association of Critical Care Nurses (AACN)
- American Association of Nurse Anesthetists (AANA)
- American College of Nurse-Midwives (ACNM)
- American Nurses Credentialing Center (ANCC) of the American Nurses Association (ANA)
- Association of Women's Health, Obstetric & Neonatal Nurses (AWHONN)
- National Association of Nursing Practitioners in Women's Health (NPWH)
- National Association of Pediatric Nurse Practitioners (NAPNAP)
- National Association of Practical Nurses Education & Service (NAPNES)
- National Federation of Licensed Practical Nurses (NFLPN)
- National League for Nursing (NLN)
- State Boards of Nursing

HIV/AIDS CE approved through the Cabinet for Health and Family Services (CHFS) is also accepted.

Additional information about CE/competency is located at <http://kbn.ky.gov/ce.htm> on the KBN website.





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FNP FACULTY POSITIONS

Bellarmine University invites applications for two tenure track positions at the Assistant or Associate Professor levels to teach primarily in the Family Nurse Practitioner track of the graduate nursing program beginning August 2009. Doctoral degree and NP certification is required. Teaching experience preferred. Preference will be given to candidates with a record of scholarly work.

Please send a current curriculum vitae and three letters of recommendation by January 15, 2009, to Barbara Lee, NEP, MS, RN, BC, ONCC, Leaning School of Nursing and Health Sciences, Bellarmine University, Louisville, KY 40203-0671. Applications may also be submitted via email to lee@bellarmine.edu or fax at 502-452-5958. Review of applications will begin promptly and continue until the positions are filled.

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- Must be willing to pursue additional training.

UPDATE ON THE ORDER OF TAKING NCLEX AND COMPLETING THE CLINICAL INTERNSHIP

The growth of knowledge and the complexity of the nursing profession make it impossible for a new nurse to graduate from school with all the skills and abilities necessary to function independently in the practice arena. Nurse Managers frequently report to the Board that new graduates lack sufficient practical clinical skills to handle the workload and complexity in today's healthcare settings. In 2006, Kentucky became the first state to require new graduates to complete a clinical internship prior to receiving full licensure. For the safety of the citizens of the Commonwealth, the Board of Nursing (KBN) believes that new graduates need mentoring by experienced professionals.

The "Clinical Internship" establishes that new graduates will have a mentor for a minimum of 120 hours post graduation. As of January 1, 2006, any individual seeking licensure in Kentucky by examination and/or endorsement that has not practiced for at least 120 hours following graduation will be required to complete a clinical internship and pass NCLEX prior to full licensure being granted. The statute, KRS 314.011(20), defines the clinical internship as: "A supervised nursing practice experience which involves any component of direct patient care." The statute further specifies that the internship "shall last a minimum of 120 hours and shall be completed within six (6) months of the issuance of the provisional license" (KRS314.041). The key elements of the clinical internship include: direct patient care, supervision by a licensed nurse, 120 hours in duration, and a six month provisional license time frame.

During the April 2008 KBN meeting, the Board considered concerns expressed by several stakeholders regarding the sequence required of completing the clinical internship prior to taking NCLEX. Initially, the administrative regulation 201 KAR 20:070 required an applicant to first complete the clinical internship before being made eligible to take the licensing exam (NCLEX). According to communication received at the Board office, this sequence has caused difficulties for some applicants and some employers. At the April meeting, the Board voted to adjust the sequence for the internship. *Effective May 5, 2008, the administrative regulation was changed to allow an applicant to take NCLEX prior to completing the clinical internship, if they so choose.* Both passing the NCLEX and completion of the clinical internship are still required by law in order to be licensed as a nurse in Kentucky.

Prior to graduation, candidates are encouraged to apply for licensure with both KBN and Pearson Vue. The KBN application is related to licensure within the state, while application to Pearson Vue is to take the actual NCLEX or

licensure exam. When all Kentucky application requirements have been met, the KBN will issue a provisional license to the candidate and, concurrently, notify Pearson Vue that the applicant is eligible to test. The applicant can then begin the 120-hour clinical internship requirement and may make an appointment to test. It is up to the candidate if they wish to test before or after completing the clinical internship.

Once the Board receives notification from Pearson Vue that the candidate has been successful on NCLEX and the completion of the 120-hour clinical internship has been verified, a Kentucky nursing license will be issued. If KBN has not received verification that the internship was completed, although the applicant has passed NCLEX, a license will not be issued until such time that verification is received. Should the applicant fail NCLEX, the provisional license will be revoked and any time spent in completion of the internship will become void.

There is no change as to a new graduate's practice during the time of the internship or while they are practicing on a provisional license. Once the provisional license has been received or verified online, the new graduate can begin the clinical internship. During the period of time that the new graduate holds the provisional license, he/she will use the title RNA (Registered Nurse Applicant) or LPNA (Licensed Practical Nurse Applicant). For a new graduate, a primary factor in the selection of an agency where the internship will be completed should be based on the ability to engage in patient care under the direct supervision of a licensed nurse. To qualify as direct supervision, the nurse responsible for the applicant shall at all times be physically present in the facility and immediately available to the applicant.

Nurses are considered to be the heart and soul of health care settings, the front line caregiver to clients. Supporting nurses through their critical entry into the profession is not only good for the development of the nurse and the employer, but it is most importantly good for the patient. Regulation implies the intervention of the government to accomplish an end beneficial to its citizens. Through the implementation of administrative regulations, the Kentucky Board of Nursing has taken a step to assist new graduates in developing entry level clinical competence while under the guidance of an experienced professional.

For more information on the clinical internship, refer to the KBN website at www.kbn.ky.gov.

Kentucky Nurse Educators Earn Recognition

Certification in any field allows professionals to be recognized for their knowledge within a given specialty area.

For many years, nurses have been able to document their expertise by obtaining certification, primarily through the American Nurses Credentialing Center, within their clinical specialty area. As certification demands increased, one specialty area was overlooked—that of nursing education. Often, nursing education was not considered to be a specialty, and nurses were encouraged to seek certification in their specific clinical specialty area. Teaching in an academic setting is indeed a full body of knowledge that must be acquired through advanced education beyond entry level. The skills and knowledge of how to teach has developed into a recognized specialty with defined standards of practice and identified competencies.

The National League for Nursing (NLN) has been a champion for nurse educators and has led the way in establishing recognition opportunities for educators. The NLN recognized that certification “communicates to students, peers, and the academic communities that the highest standards of excellence are being met.” In 2005, the NLN unveiled the Certified Nurse Educator (CNE) program with a mission to “recognize excellence in the advanced specialty role of the academic nurse educator.”

The first test was administered in Baltimore, MD, with candidates participating from all 50 states and the District of Columbia. 174 educators passed the examination the first year, representing an 85 percent pass rate. Candidates

following this first administration can now take the examination online at established testing centers across the United States. According to the NLN website, as of March 31, 2008, a total of 954 nurse educators from across the country have earned this credential—many from our own state of Kentucky. It is through this excellence in nursing education that we hope to ensure the next generation of skilled nursing professionals. Join KBN in congratulating Kentucky nurse educators who are the first to hold this distinguished credential:

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- Margie Charasika
- Madonna Carter Combs
- Donna Corley
- Claudia Diebold
- Janet Gross
- Connie Heflin
- Nikole Anderson Hicks
- Teresa Howell
- Stephanie Johnson
- Janie Kitchen
- Deborah Long
- Lucille Mays
- Barbara Minix
- Lora Kay Moore
- Susan Mudd
- Carolyn Neal
- Brenda Parker Owen
- Emily Piercy
- Beverly Siegrist
- Ida L. Slusher
- Patricia Spurr
- Claudia Reeves Stoffel
- Peggy Tudor
- Michele Waters
- Brenda Wilburn
- Mary Gail Wilder
- Patricia Woods



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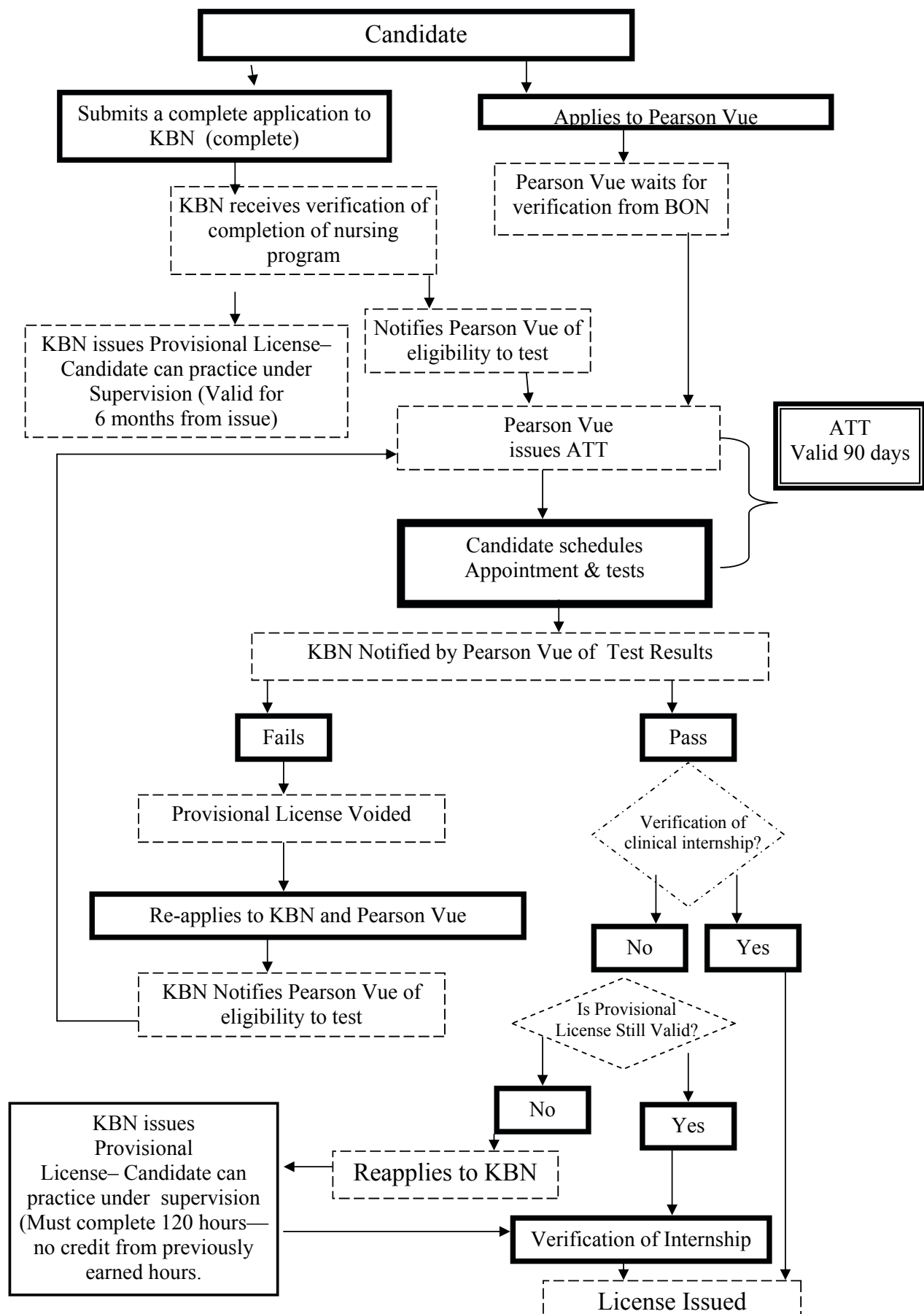
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CLINICAL INTERNSHIP



Kentucky Nurses Contribute to NCLEX® Exam Development

The Kentucky Board of Nursing is pleased to recognize the following Kentucky nurses as participants in the NCLEX® test development process:

2007 and 2008

| Position | Name | Panel |
|-----------|---------------------------|----------------------------------|
| Member | Tami Lynn Baxter | RN Item Review |
| Member | Jennifer B. Crowley | RN Item Writing |
| Member | Angela Harlan | PN Panel of Judges |
| Member | Catherine Smith Rainwater | RN Item Review |
| Member | Michele Ann Riley | PN Item Review |
| Member | Renee Marie Sirmay-Sora | PN Item Review |
| Member | Aimee Michelle Thompson | PN Item Writing |
| Member | Peggy Ann Williford | PN Item Writing |
| Alternate | Vickie Smith Brown | RN Item Review |
| Alternate | Carol Allison Carpenter | PN Item Review |
| Alternate | Denise Darlene Kilburn | RN Item Review |
| Candidate | Clemma K. Alcorn | RN Item Writing |
| Candidate | Donna Bowles | RN Item Writing/Review |
| Candidate | Carol Carpenter | RN Item Review; PN Item Review |
| Candidate | Carolyn Cauhorn | RN Item Writing |
| Candidate | Catherine R. Cooke | RN Item Writing/Review |
| Candidate | Keely Livings Deweese | RN Item Review |
| Candidate | Edna Ann Dukes | RN Item Writing/Review |
| Candidate | Carolyn Duncan | RN Item Writing |
| Candidate | Jessica Estes | RN Item Review |
| Candidate | Mary Ger | RN Item Writing |
| Candidate | Jeff Goddard | PN Item Writing |
| Candidate | Amy Leigh Gregg | RN Item Writing |
| Candidate | Vicki Grubbs | RN Item Writing |
| Candidate | Lisa Carter Harris | RN Item Review |
| Candidate | Christine A. Hawkins | RN Item Review |
| Candidate | Mary Jane Jones | RN Item Writing |
| Candidate | Robert Knies | RN Item Review |
| Candidate | Susan Livingston | PN Item Writing |
| Candidate | Nancy McConnell | RN Item Writing/Review |
| Candidate | Kelly Morris | RN Item Writing |
| Candidate | Stephen Overby | RN Item Review |
| Candidate | Melissa Perry | PN Item Writing |
| Candidate | Mary Ellen Pike | RN Item Writing |
| Candidate | Tiffany Reed | RN Item Writing/Review |
| Candidate | Donna Ricketts | RN Item Writing |
| Candidate | Bridget Roberts | RN Item Writing; PN Item Writing |
| Candidate | Sonia Rudolph | RN Item Review |
| Candidate | Jason T. Shuffitt | RN Item Review |
| Candidate | Claudia Steffel | RN Item Review |
| Candidate | Elizabeth I. Stockdell | RN Item Writing |
| Candidate | April Renee Tenhunfeld | PN Item Writing |
| Candidate | Nancy Trokan-Mathison | RN Item Review |
| Candidate | Gloria Wacks | RN Item Review |
| Candidate | Charles Wesley Williamson | RN Item Writing |
| Candidate | Michael Williamson | PN Item Writing |

These nurses assisted the National Council of State Boards of Nursing to ensure the inclusion of NCLEX content that is current, accurate, practice-related, and appropriate for an entry-level practitioner. If you would like to participate, visit www.ncsbn.org to complete an online application.

continued from page 22

Domestic Violence CE Requirement: Nurses seeking reinstatement, licensure by endorsement from another state, and examination candidates educated outside of Kentucky must earn three contact hours of KBN approved domestic violence CE within three years of licensure into Kentucky. This is a one-time earning requirement. Do not submit a copy to KBN unless requested to do so. Any approved CE provider may offer the mandatory domestic violence course provided that, as a minimum, the model curriculum approved by the Domestic Violence Training Committee of the Governor's Commission on Domestic Violence is followed.

Sexual Assault CE Requirements: Sexual Assault Nurse Examiner (SANE) credentialed nurses must earn five contact hours of approved sexual assault CE (forensic medicine or domestic violence CE will meet this requirement). These hours count as part of the CE requirement for the period in which they are earned and must be offered by an approved CE provider (see Table 1).

HIV/AIDS CE Requirements: Two hours of mandatory HIV/AIDS CE must be earned once every ten years. The LPN earning period is from 11/1/2001 – 10/31/2011; RN from 11/1/2002 – 10/31/2012. The HIV/AIDS course must be approved by the Cabinet for Health and Family Services or offered by an approved CE provider (see Table 1). Nurses are required to maintain proof of earning the CE for at least 12 years.

CE Requirements for New Licensees: All licensees are exempt from the CE/competency requirement for the first renewal period of their Kentucky license issued by examination or endorsement. If an individual does not renew the original license, the exemption for the CE/competency is lost and all CE requirements must be met before the license can be reinstated.

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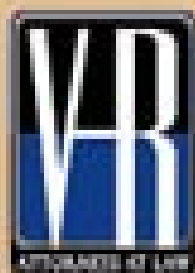


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DISCIPLINARY Actions

* License has not been returned to KBN

Since the publication of the summer edition of the *KBN Connection*, the Board has taken the following actions related to disciplinary matters as authorized by the *Kentucky Nursing Laws*. A report that contains a more extensive list of disciplinary actions is available on the KBN website at <http://kbn.ky.gov/conprotect/investdiscp/disciplinary.htm>. If you need additional information, contact KBN's Consumer Protection Branch at 502-429-3300.

CEASE AND DESIST NOTICE ISSUED

| | | |
|----------------|----------------|---------------|
| Adams, Christy | London, KY | Eff. 06/13/08 |
| Green, Laura | Harrogate, TN | Eff. 08/29/08 |
| Lewis, Whitney | Louisville, KY | Eff. 07/14/08 |

LICENSE CREDENTIAL REVOKED

| | | | |
|---------------------------|-------------|-------------------|---------------|
| Phillips, Cheryl Thompson | RN #1035843 | Elizabethtown, KY | Eff. 06/18/08 |
|---------------------------|-------------|-------------------|---------------|

IMMEDIATE TEMPORARY SUSPENSION OF LICENSE/CREDENTIAL

| | | | |
|---------------------------------|--------------|---------------------|---------------|
| * Beatty, Kimberly Ann | LPN #2036511 | Bardstown, KY | Eff. 07/10/08 |
| * Farmer, Holly Dawn Kirkman | LPN #2038466 | Shepherdsville, KY | Eff. 06/19/08 |
| * Freeberg, Ginger Hacker | RN #1112276 | Lexington, KY | Eff. 08/15/08 |
| * Green, Renee Sabrina Woodson | RN #1103414 | Louisville, KY | Eff. 09/12/08 |
| Harris, Lisa A. Beverly | RN #1060520 | LaGrange, KY | Eff. 08/01/08 |
| * Jarecki, Latisha Neal Short | LPN #2036108 | New Albany, IN | Eff. 06/19/08 |
| * Lee, Danielle Rae | RN #1101591 | Leitchfield, KY | Eff. 06/18/08 |
| * Meese, Gwendolyn Marie Linton | LPN #2035548 | Latonia, KY | Eff. 06/16/08 |
| * Nevill, Alva J. | LPN #2027486 | Elizabethtown, KY | Eff. 08/27/08 |
| * Perry, Amy Renelle Manley | RN #1094504 | Sharpsburg, KY | Eff. 07/25/08 |
| | LPN #2032557 | | |
| Power, Lea Ann | RN #1063029 | Metropolis, IL | Eff. 07/02/08 |
| | LPN #2022127 | | |
| * Smith, Loretta A. | RN #1076093 | Debord, KY | Eff. 06/19/08 |
| * Stahl, Stephanie L. | LPN #2038268 | Erlanger, KY | Eff. 08/01/08 |
| * Sullivan, Michael Lynn | LPN #2028619 | Russell Springs, KY | Eff. 08/29/08 |
| * Tackett, Tracy Rae | LPN #2038810 | Ashland, KY | Eff. 06/18/08 |
| * Whitmer, Mary Lou | LPN #2042246 | Princeton, FL | Eff. 07/10/08 |
| * Wilder, Stacey A. | RN #1110808 | Booneville, KY | Eff. 06/18/08 |
| * Williams, Deloris J. McGough | RN #1069792 | Madisonville, KY | Eff. 07/01/08 |

LICENSE IMMEDIATELY SUSPENDED OR DENIED REINSTATEMENT FOR FAILURE TO COMPLY WITH BOARD ORDER; STAYED SUSPENSION IMPLEMENTED OR TERMINATION FROM THE KARE PROGRAM

| | | | |
|------------------------------------|--------------|------------------|---------------|
| * Bonn, Amanda Rena Torres Concha | RN #1111737 | Louisville, KY | Eff. 08/14/08 |
| * Bybee, Angela Rhea Piercy | LPN #2035730 | Lawrenceburg, KY | Eff. 07/31/08 |
| * Cook, Kimberly A. Lehman | RN #1055512 | Las Vegas, NV | Eff. 06/18/08 |
| * Freer, Sherry Lynn Starkey | RN #1067904 | Clay, KY | Eff. 08/19/08 |
| * Peyton, Stacy | LPN #2029862 | Louisville, KY | Eff. 07/10/08 |
| * Pruitt, Brenda L. Fout | RN #1075130 | Eddyville, KY | Eff. 10/21/08 |
| * Puckett, Deborah Sue | RN #1060575 | Louisville, KY | Eff. 07/31/08 |
| * Shepherd, Stacy D. Messer | RN #1106791 | Corbin, KY | Eff. 07/31/08 |
| * Stewart, Melissa Jeanine Johnson | RN #1091397 | Greenup, KY | Eff. 08/26/08 |

LICENSE/CREDENTIAL VOLUNTARILY SURRENDERED

| | | | |
|-----------------------------|-------------|------------------|---------------|
| Brown, Deborah Sue Whitacre | RN #1049694 | Radcliff, KY | Eff. 07/01/08 |
| Donovan, Mary Kay Wainscott | RN #1113103 | Cincinnati, OH | Eff. 09/11/08 |
| Jones, Tava Jo | RN #1096281 | Amelia, OH | Eff. 07/01/08 |
| Morris, Vonda Marie Cecil | RN #1081759 | Owensboro, KY | Eff. 07/01/08 |
| Myers, Joey Hayes | RN #1071250 | Madisonville, KY | Eff. 08/21/08 |
| Ronsdottir, Calla Gunna | RN #1106309 | Prospect, KY | Eff. 07/10/08 |

LICENSE/CREDENTIAL TO BE REINSTATED - LIMITED/PROBATED

| | | | |
|------------------------------|--------------|-------------------|---------------|
| Langford, Ivana Ana Heist | RN #1096812 | Fort Mitchell, KY | Eff. 07/01/08 |
| Lewis, Misty Michelle Hudson | LPN #2035942 | Vicco, KY | Eff. 07/10/08 |
| Sparks, Darlene McIntosh | LPN #2031951 | Beattyville, KY | Eff. 08/21/08 |

LICENSE/CREDENTIAL LIMITED/PROBATED

| | | | |
|-------------------------------|--------------|----------------|---------------|
| Bailey, Hilda Kay Darnell | RN #1053491 | Louisville, KY | Eff. 07/01/08 |
| Gearlds, Lisa Dawn | LPN #2033828 | Edmonton, KY | Eff. 07/25/08 |
| Gerding, Charymar Diaz | RN #1105398 | Louisville, KY | Eff. 06/11/08 |
| Lyvers, Tara Hillarie | LPN #2036741 | Bardstown, KY | Eff. 09/11/08 |
| Page, Alexandra Staniewicz | LPN #2039370 | Princeton, KY | Eff. 08/21/08 |
| Smith, Angela Morrison Kelley | RN #1097177 | Owensboro, KY | Eff. 07/25/08 |

LICENSE/CREDENTIAL REPRIMANDED

| | | | |
|-----------------------------|--------------|-------------------|---------------|
| Eskildson, Lauri Elizabeth | LPN #2031541 | Corydon, IN | Eff. 06/11/08 |
| Gibson, William Scott | RN #1070845 | Danville, KY | Eff. 06/11/08 |
| Jackson, Phyllis Ann Knight | LPN #2025847 | Eminence, KY | Eff. 07/25/08 |
| Jordan, Melissa Jean Mills | LPN #2031767 | Flatlick, KY | Eff. 07/25/08 |
| Lark, Alma J. Ousley | RN #1055643 | Elizabethtown, KY | Eff. 06/11/08 |
| Lee, Juanita Myrle VanDyke | RN #1091727 | Grundy, VA | Eff. 08/21/08 |
| Lucas, Kelli Michelle | LPN #2039418 | California, KY | Eff. 08/21/08 |
| Stoltz, Deborah Lynn | LPN #2027775 | New Albany, IN | Eff. 08/21/08 |

CONSENT DECREES ENTERED FISCAL YEAR TO DATE

| | |
|--|-----------|
| Imposition of civil penalty for practice without a current active license, temporary work permit, or ARNP registration | 2 |
| Imposition of civil penalty for failure to meet mandatory continuing education requirement..... | 14 |
| Imposition of civil penalty for a positive drug screen..... | 3 |
| LICENSES REMOVED FROM PROBATION FISCAL YEAR TO DATE | 3 |
| KENTUCKY ALTERNATIVE RECOVERY EFFORT (KARE) PROGRAM GRADUATES FISCAL YEAR TO DATE | 11 |

KBN SPOTLIGHT

Executive Branch

by Charlotte Beason, Ed.D., RN, NEA, *Executive Director* and Sue Derouen, RN, *Operations Manager*

The role of the KBN Executive Branch is to enable Board members and staff to fulfill the KBN mission — to protect public health and welfare by development and enforcement of state laws governing the safe practice of nursing, nursing education and credentialing. These enabling actions include policy implementation, providing guidance and consultation, supporting board members in their activities, ensuring adequate resources, and providing an adequate infrastructure for staff to carry out their prescribed duties.

This KBN organizational unit includes the Executive Director, the General Counsel, the Operations Manager, the Personnel Administrator, and their assistants. The Executive Director, Dr. Charlotte Beason, is the chief executive officer of the agency. She was hired by the Board and is responsible for all aspects of the agency business and direction of activities that enforce state laws governing the safe practice of nursing. She is the ultimate supervisor for all KBN staff. As General Counsel, Nathan Goldman is the attorney for the Board and also serves as the Board's Hearing Officer for disciplinary cases. Sue Derouen, KBN's Operations Manager, is the chief operating officer for the Board. She oversees the daily operations of

the agency and manages the budget and financial actions of KBN. The Personnel Administrator, DeOndrea Bowdre, is responsible for all personnel matters affecting the staff of the agency. She is also the liaison between KBN and those branches of state government with responsibilities for personnel activities and oversight.

The Executive Branch is also ably served by the following assistants: Diane Thomas, Executive Assistant, Paula C. Chumbley, Legal Assistant, and Adrienne Harmon, Administrative Assistant. In addition to more standard office practices, this group takes on a diverse range of activities: acting as legal clerk and notary public and disseminating board regulations and support for Board members before, during, and after the Board's paperless meetings.

In addition to the day-to-day functioning of the agency, the Executive Branch has some special responsibilities that involve the legislature and the administrative regulation process. During each General Assembly, the Executive Office monitors legislation affecting nursing practice. Staff responds to legislators requesting information or opinions from KBN and also appears before various legislative committees as invited. KBN also initiates legislation to update the *Kentucky*

Nursing Laws, keeping them consistent with current clinical, education and administrative practice. The Executive Director and General Counsel are involved in shepherding the proposed bill through the legislative process by offering testimony before the appropriate committees and answering legislative inquiries.

The Board also has a number of administrative regulations that are periodically amended. The Executive Branch is responsible for this amendment process that is commonly referred to as 'promulgating' regulations. All amendments and new administrative regulations must be approved by the Board after which General Council initiates the promulgation process that includes publishing the document, providing an opportunity for comment and, if necessary, holding a public hearing. The proposed regulations are then reviewed and approved by two committees of the state legislature.

In summary, the Executive Branch is charged with implementation of the *Kentucky Nursing Laws* and regulations. The staff noted above fulfills their role by coordinating and overseeing both the policy-making and operational components of KBN and its staff.



CAPTASA Conference

• January 23 and 24, 2009

The 9th Annual Clinical Applications of the Principles of Treatment of Alcoholism and Substance Abuse (CAPTASA) will be held January 23 and 24, 2009, at the Embassy Suites, Lexington, Ky. The mission of the CAPTASA Conference is to educate and inform professionals and concerned persons about addictions, alcoholism, dependencies, and available treatment options. Topics to be presented at the 2009 conference include, but are not limited to, PTSD/addiction

treatment; alternatives in pain management; gambling addiction; treatment and healing in the recovering family; eating disorders and the elderly; and substance abuse.

For registration information, please go to www.captasa.org or contact Sandy Patrick at the Kentucky Physicians Health Foundation at 502-425-7761 or sandy@captasa.org. As enrollment is limited, interested parties should register early.

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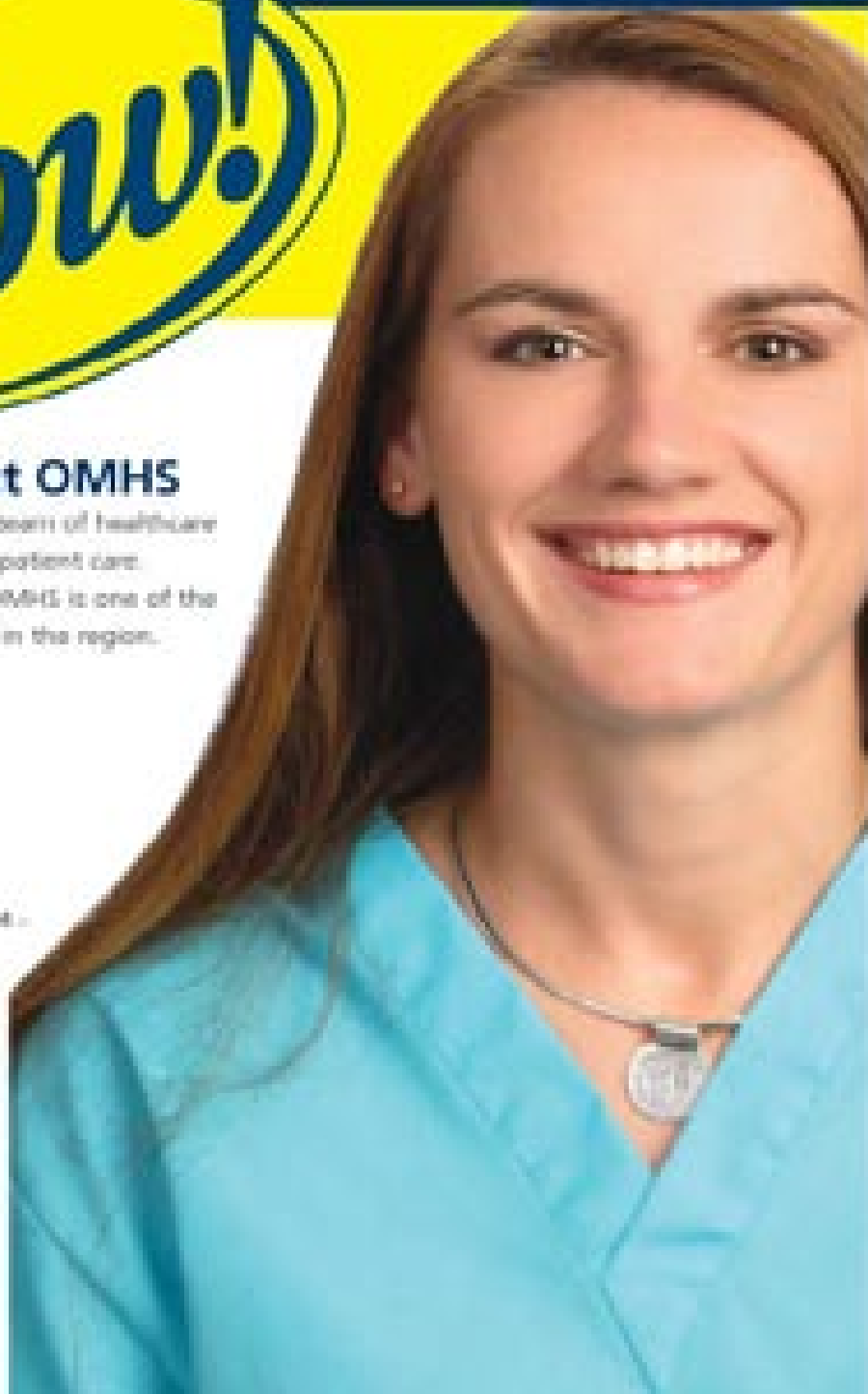
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